

CLAIMS ONLY							SERIAL NO.		FILING DATE		
							APPLICANT(S)				
CLAIMS											
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*		*		*	
		IND.	DEP.	IND.	DEP.						
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TOTAL IND.	1		↓			↓			↓		
TOTAL DEP.	1		←			←			←		
TOTAL CLAIMS	2										

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS